



# ILLINOIS ENVIRONMENTAL PROTECTION AGENCY

## Livestock Facility Inspection Checklist

GENERAL INFORMATION									
TYPE OF INSPECTION: <input checked="" type="checkbox"/> CAFO <input type="checkbox"/> COMPLAINT <input type="checkbox"/> RECONNAISSANCE <input type="checkbox"/> ERU FOLLOW UP <input type="checkbox"/> OPERATOR REQUEST <input type="checkbox"/> OTHER									
FACILITY NAME (LLC, Inc., Corp, Partnership, sole proprietorship, etc.) <b>Wildcat Farms, LLC.</b>						INSPECTION DATE <b>May 12, 2011</b>		ARRIVAL TIME <b>10:20 AM</b>	
ADDRESS <b>2558 North County Road 2150</b>						INSPECTOR(s) <b>E. Ackerman &amp; S. Fowler</b>		DEPARTURE TIME <b>12:19 PM</b>	
CITY <b>Dallas City</b>				STATE <b>IL</b>		ZIP CODE <b>62330</b>		ACCOMPANIED BY (if applicable) <b>Bill Beckman &amp; Henry Wilson</b>	
LEGAL DESCRIPTION		COUNTY <b>Hancock</b>	SECTION <b>28</b>	TOWNSHIP <b>T7N</b>	RANGE <b>R6W</b>	TEMPERATURE <b>76 F</b>	PRECIPITATION TYPE <b>Sunny</b>		
Facility Owner(s): <small>Exemption 6 and Exemption 7(C)</small>		NAME <b>Carl High (Manager)</b>				CONTACTED <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO		PHONE	MOBILE
		ADDRESS			CITY		STATE		ZIP CODE
		NAME				CONTACTED <input type="checkbox"/> YES <input type="checkbox"/> NO		PHONE	MOBILE
		ADDRESS			CITY		STATE		ZIP CODE
Facility Operator(s): <small>Exemption 6 and Exemption 7(C)</small>		NAME <b>Bill Beckman</b>				CONTACTED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		PHONE <small>Exemption 6 and Exemption 7(C)</small>	MOBILE
		ADDRESS			CITY		STATE		ZIP CODE
		<b>Exemption 6 and Exemption 7(C)</b>							
		NAME <b>Henry Wilson (Soil and Water Conservation Manager)</b>				CONTACTED <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO		PHONE <small>Exemption 6 and Exemption 7(C)</small>	MOBILE
		ADDRESS			CITY		STATE		ZIP CODE
		<b>Exemption 6 and Exemption 7(C)</b>							
NPDES PERMIT INFORMATION (If no NPDES Permit, skip this section)									
1. What type of NPDES permit has been issued? <input type="checkbox"/> Individual NPDES Permit <input type="checkbox"/> General NPDES Permit								NPDES #	
2. What date was the NPDES permit issued?									
3. What date does the NPDES permit expire?									
4. Is a copy of the NPDES permit onsite?								<input type="checkbox"/> YES	<input type="checkbox"/> NO
5. Permitted number of animal units?									
6. Does the NPDES Permit contain a compliance schedule?								<input type="checkbox"/> YES	<input type="checkbox"/> NO
7. Have there been any changes made to the production area since the permit was issued?								<input type="checkbox"/> YES	<input type="checkbox"/> NO
If "YES", provide a detailed description of those changes. <b>None</b>									

<b>LAND APPLICATION/NUTRIENT MANAGEMENT</b>		
1. How many TOTAL acres are available for land application? <u><b>868 (easement)</b></u> acres		
2. How many acres are READILY available for land application at the time of inspection? _____ acres		
3. Estimated annual quantities of liquid waste <u><b>11 Million</b></u> gallons		
4. Estimated annual quantities of solid waste _____ tons		
5. Does the facility have a contractor perform land application? If "YES", Name of Contractor: <u><b>Matt Bradshaw-Twin Valley Pumping</b></u>		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
6. What type of land application equipment is available to the facility? <input checked="" type="checkbox"/> Umbilical Injection <input type="checkbox"/> Honeywagon Injection <input type="checkbox"/> Honeywagon Surface <input type="checkbox"/> Irrigation <input type="checkbox"/> Rotational Gun <input type="checkbox"/> Manure Spreader <input type="checkbox"/> Vegetative Filter <input type="checkbox"/> Other _____		
7. Does the facility calibrate the land application equipment? If "YES", What method is used?  <b>Contracted</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO
8. Does the facility land apply within the 150 foot setback from any water well? If "YES", Explain  <b>Contracted</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO
9. Does the facility land apply within the 200 foot setback from any surface water? If "YES", Explain  <b>Contracted</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO
10. Does the facility land apply near any residences? If "YES", Explain <b>NE-Closest Residence, not sure if applied near.</b> <b>Contracted</b>		<input type="checkbox"/> YES <input type="checkbox"/> NO
11. Is livestock waste transferred off-site to another party? If "YES", Are records of manure transfers kept? If "YES", Ask to see records		<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> YES <input type="checkbox"/> NO
12. Does the facility have a current NMP or CNMP? If "YES", Does the facility maintain a copy of the nutrient management plan (NMP) onsite?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
13. Does the NMP reflect the current operational characteristics (number of animals, cropping, etc.)?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
14. Are the number of acres owned/leased consistent with those in the NMP?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
15. Is manure and wastewater being applied in accordance with setback/buffer requirements of the NMP?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
16. Are all of the records identified in the NMP being maintained and kept current?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
17. Are records being maintained at the required frequency?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
18. Are records being maintained onsite for the period required by NMP and/or NPDES permit?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO
19. Is the NMP adequately addressing the storage, handling and application of manure and wastewater to prevent discharges to waters of the U.S.?		<input checked="" type="checkbox"/> YES <input type="checkbox"/> NO

**LIVESTOCK FACILITY DESCRIPTION****Facility Type**

- |   |   |
|---|---|
| <input checked="" type="checkbox"/> Total Confinement Buildings | <input type="checkbox"/> Open Earthen Feedlot |
| <input type="checkbox"/> Open Confinement Buildings             | <input type="checkbox"/> Vegetated Pasture    |
| <input type="checkbox"/> Open Concrete Feedlot                  | <input type="checkbox"/> Other _____          |

Type of Animals	Number of Animals (currently)	Capacity	Type of Confinement
SWINE > 55 LBS	6,000 (Sow)	6,000	Total Sow

Does the facility have an Illinois Certified Livestock Manager (300 or greater animal units)?	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
If greater than 1000 animal units but less than 5000 animal units, does the facility have a waste management plan?	<input type="checkbox"/> N/A	<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO
If greater than 5000 animal units, has the facility submitted a waste management plan to IDOA for review?	<input checked="" type="checkbox"/> N/A	<input type="checkbox"/> YES	<input type="checkbox"/> NO
Does the facility have any other locations under common ownership, or where equipment and/or manure is shared, or where the other site shares land application sites? If so, put names and addresses below. <b>None</b>	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO	

**LIVESTOCK WASTE STORAGE**

- Does the facility have any existing livestock waste containment system? ☒ YES ☐ NO  
If NO, then proceed to question 10.
- General description of the waste containment system (include solid and liquid manure handling, mortality, and feed storage areas).  
**All manure is handled in a liquid form at this facility. Manure is held in one of the 2 above ground slurry storage tanks on site.**  
  
**Mortalities are composted on-site.**

Type of Storage	Total Storage Capacity (Specify Units)
<input type="checkbox"/> Anaerobic Lagoon	
<input type="checkbox"/> Covered Lagoon	
<input type="checkbox"/> Holding Pond	
<input checked="" type="checkbox"/> Above Ground Storage Tank ("Slurrystore")	<b>(2)-Each 176' diameter X 19' Deep Capacity ~3.5 Mgal</b>
<input type="checkbox"/> Below Ground Storage Tank	
<input type="checkbox"/> Settling Basin	
<input type="checkbox"/> Roofed Storage Shed	
<input type="checkbox"/> Concrete Pad	
<input type="checkbox"/> Impervious Soil Pad	
<input type="checkbox"/> Underfloor Pits	
<input type="checkbox"/> Anaerobic Digester	
<input type="checkbox"/> Manure Stacks	
<input type="checkbox"/> Vegetative Filter	
<input type="checkbox"/> Other _____	
<input type="checkbox"/> None	

3. Do the storage structures have depth markers or staff gauges? ☒ YES ☐ NO

4. Are levels of manure in the storage structures recorded and records kept? ☒ YES ☐ NO

5. Do the storage structures have adequate freeboard? ☒ YES ☐ NO

6. Estimated final stage storage structure freeboard **~24 feet (in total)** in.

7. Do facility personnel perform routine visual inspections of the storage structures? ☒ YES ☐ NO

8. Are the routine visual inspections documented? ☒ YES ☐ NO

9. Does the system have an outfall or discharge point? ☐ YES ☒ NO

If "YES", please provide a description (overflow pipe, spill way, etc. Include a description the area receiving the discharge).

**None**

10. Are there any portions of the production area where runoff is not controlled? ☐ YES ☒ NO

If "YES", provide a detailed description of the area(s) of concern:

**None**

## **MORTALITIES MANAGEMENT**

1. How are mortalities managed? (Composted, buried, burned, rendering service, other)

**Composted within a covered building.**

2. Are mortalities documented and are records kept? ☒ YES ☐ NO

**FACILITY WATER SOURCES**

1. What type of method is used to provide drinking water for the animals?  
☐ Overflow waters   ☐ Tip Tanks   ☒ Nipple waters   ☐ Water Bowls   ☒ Other **Trough**
2. How is the water for animals obtained?  
☐ Community PWS   ☐ On-Site Well   ☒ On-Site Impoundment   ☐ Other \_\_\_\_\_
3. Is a mist cooling system used? ☒ YES   ☐ NO  
How is mist water contained?  
**Re-used**

**DAIRY OPERATION (If No Dairy, skip this section)**

1. How many times per day are cows milked? \_\_\_\_\_
2. Describe how the dairy's non-contact cooling water is contained (Example: it is reused for drinking water for the animals).  
**None**
3. Describe how the milking parlor is cleaned (hose or flush) and where the process wastewater goes and how it is contained.  
**None**
4. Describe how the tank(s) are washed and where the process wastewater goes and how it is contained.  
**None**
5. Describe where process wastewater from the plate cooler goes and how it is contained.  
**None**

**BEDDING (If No Bedding, skip this section)**

1. Describe what type of bedding is used for the animals.  
**None**
2. Describe how bedding is collected and how often.  
**None**
3. What is done with the used bedding? ☐ Reused   ☐ Land Applied

**MANURE COLLECTION**

1. How is manure collected?
- ☒ Under Floor Pit
- ☐ Scraped: ☐ Automatic ☐ Manual
- ☐ Flush
- ☐ Solids Separator
- ☒ Other: **Shallow pits that have gravity pull plug to pump station that pumps to 1 of the 2 slurry tanks.**
2. If manure collection system uses either clean or reused water to flush, describe where this water goes and how it is contained.
- None**

**FEED STORAGE CONTAINMENT**

1. Describe how feed (silage, hay, etc) is contained.
- ☒ Bulk Bins
- ☐ Silage Pit
- ☐ Ag Bags
- ☐ Hay: ☐ Barn ☐ Outdoor
- ☐ Other: \_\_\_\_\_
2. Describe how feed (silage, hay, etc) runoff is contained.
- ☒ Not Applicable – Feed totally enclosed
- ☐ Other: \_\_\_\_\_
- ☐ None

**RECEIVING SURFACE WATERS**

1. Provide a description of the flow path from the facility to the nearest named surface water.
- Surface runoff from the site drains directly into a small stream. This stream is an unnamed tributary to Wildcat Creek. Wildcat Creek flow to Grove Creek tributary to the La Moine River.**
2. What is the name of the receiving stream?
- Unnamed tributary to Wildcat Creek**
3. Status of the named surface water: ☐ Intermittent ☒ Perennial
4. Are any unnatural bottom deposits observed in the receiving stream: ☐ YES ☒ NO
- If "YES", provide a description of the deposits: **None**

**DISCHARGES**

1. Have there been any documented discharges of livestock waste to surface water <i>in the past year</i> ? If "NO" proceed to question 2.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
a. If "YES", specify the date(s).		
b. What was the reason for the discharge?		
c. Was the discharge the result of a 25 year-24 hour rainfall event?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
d. What was the precipitation amount? <i>(if applicable)</i>		
e. Was IEMA notified of the discharge?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
f. Has the facility taken corrective action to remedy the situation which caused the discharge(s)?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
If "YES", describe actions taken: <b>None</b>		
2. Is the facility currently discharging livestock waste from the production area? If "NO" proceed to next section.	<input type="checkbox"/> YES	<input checked="" type="checkbox"/> NO
b. Was the discharge the result of a 25 year-24 hour rainfall event?	<input type="checkbox"/> YES	<input type="checkbox"/> NO
c. What was the precipitation amount? <i>(if applicable)</i>		
d. What is the reason for the discharge?		

**OTHER COMMENTS/NOTES**

**This facility has many bio-security measures that have been requested of our agency. Please see the attached report for details.**

**Two samples were taken at this facility. The unnamed stream that flows into Wildcat Creek was dark in color and had foam in it.**

Will an inspection report be attached? ☒ YES ☐ NO

**INSPECTOR'S SIGNATURE****REPORT DATE****May 12, 2011**